



Department of Public Safety and Correctional Services

Maryland Commission on Correctional Standards

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BEVERLY HUGHES
INTERIM CHAIRPERSON

HOWARD RAY, JR.
EXECUTIVE DIRECTOR

270th Meeting

January 30, 2020

Minutes

MEMBERS PRESENT:

Delores Alexander, Citizen Member
Wayne Hill, Commissioner, Division of Correction
Dr. Maria Elmo, Healthcare Representative
Terry Kokolis, Director, Talbot County Department of Corrections
Shakia Word, Budget Analyst, Department of Budget and Management, representing
Secretary David R. Brinkley
Major T.D. Reece, Administrator, Calvert County Detention Center, (Interim
Chairperson)
Nelson Reichart, Deputy Secretary, Department of General Services, Representing
Secretary Ellington E. Churchill, Jr.
Michael Resnick, Commissioner, Division of Pretrial Detention Services
Montrell Spence, Citizen Member

MEMBERS ABSENT:

Chairperson (position vacant)
Beverly Hughes, Assistant Attorney General, representing
Attorney General Brian E. Frosh
Jeffrey Washington, Deputy Executive Director, American Correctional Association

STAFF PRESENT:

Howard Ray, Jr., Executive Director
Veronica Moore, Assistant Executive Director
Cheryle Moyer, Senior Correctional Program Specialist
Regina Russell, Correctional Program Specialist
Brian Raivel, Auditor
LaDonna Newman, Management Associate

GUESTS:

Warden Carol Harmon, Maryland Correctional Pre-Release System
Warden Jama Acuff, Brockbridge Correctional Facility
Officer Iosefa Pua'auli, Allegany County Detention Center
Facility Administrator Dehavilland Whitaker, Youth Detention Center
Lieutenant Terry Edwards, Youth Detention Center
Corporal Ashley Wright, Youth Detention Center
Sergeant Shawntae Smith, Youth Detention Center

Warden Richard Dovey, Maryland Correctional Training Center
Assistant Warden Scott Bohrer, Maryland Correctional Training Center
Security Chief Joseph Lohman, Maryland Correctional Training Center
Sergeant Johnavin McKinley, Maryland Correctional Training Center
Facility Administrator James Q. Harris, Central Maryland Correctional Facility
Major Nate' Denton, Central Maryland Correctional Facility
Major Michael Merican, St. Mary's County Detention and Rehabilitation Center
Major Deborah Dietrich, St. Mary's County Detention and Rehabilitation Center
Deputy Warden Mary Ann Thompson, St. Mary's County Detention and Rehabilitation Center
Captain Michael Pilkerton, St. Mary's County Detention and Rehabilitation Center
Captain Richard Gray, St. Mary's County Detention and Rehabilitation Center
Lieutenant Saraha Norris, St. Mary's County Detention and Rehabilitation Center
Acting Warden Jeff Nines, North Branch Correctional Institution
Lieutenant Jeff Brewer, North Branch Correctional Institution
Sergeant Anthony Frenzel, North Branch Correctional Institution
Lieutenant Colonel W. Victor DeLauter, Frederick County Detention Center and Annex
Major Michael Cronise, Frederick County Detention Center and Annex
Major Preston Foreman, Wicomico County Department of Corrections
MCO Allen Parrish, Wicomico County Department of Corrections
MCO Brittney Stevenson, Wicomico County Department of Corrections

The Maryland Commission on Correctional Standards met at the Jessup Correctional Institution Jessup (JCI) on January 30, 2020. The agenda was as follows:

1. Welcome/Introduction/Remarks
2. Approval of Minutes, September 26, 2019
3. Chair's Comments
4. Executive Director's Comments
5. Consideration of Final Reports
 - Brockbridge Correctional Facility
 - Allegany County Detention Center
 - Youth Detention Center
 - Maryland Correctional Training Center
 - Central Maryland Correctional Facility
 - St. Mary's County Detention and Rehabilitation Center
6. Continuing Business/Monitoring Reports
 - North Branch Correctional Institution
 - Frederick County Detention Center and Annex
 - Wicomico County Department of Corrections

7. New Business

- New Standard – Feminine Hygiene Products (Personal Hygiene and Menstrual Products)

8. Announcements

9. Adjournment

1. WELCOME/INTRODUCTION/REMARKS

Major T.D. Reece (Interim Chairperson) commenced the meeting at 10:00 AM. Major Reece announced that he would serve as the Interim Chairperson for the meeting, in the absence of Vice Chairperson Beverly Hughes. Interim Chairperson Reece asked everyone in attendance to introduce themselves for the record.

Interim Chairperson Reece introduced Warden Allen Gang. Warden Gang welcomed everyone to the Jessup Correctional Institution. Warden Gang expressed sentiments for a productive meeting. Warden Gang stated that he is always happy to host the Commission meetings at the Jessup Correctional Institution. Warden Gang invited the Commission Members and guests to indulge in lunch at the conclusion of the meeting.

2. APPROVAL OF MINUTES – SEPTEMBER 26, 2019

Interim Chairperson T.D. Reece entertained a motion and vote on the Minutes of the September 26, 2019 meeting. Commissioner Michael Resnick made a motion to approve the Minutes of the September 26, 2019 meeting and Dr. Maria Elmo seconded. The vote to approve the minutes was unanimous.

3. INTERIM CHAIR'S COMMENTS

Interim Chairperson Reece noted that he would entertain a modification to the agenda for individuals who were traveling a significant distance. Interim Chairperson Reece stated the meeting agenda would be modified from the traditional process due to the need to hold a closed/executive session prior to the adjournment of the general meeting. Interim Chairperson Reece stated that the process of the meeting would be the presentation of the report, comments/questions and a photo op for those facilities eligible to receive the Recognition of Achievement award. He stated that at the conclusion of the aforementioned process, any individuals wishing to stay until the conclusion of the meeting could do so, at which time they would be asked to exit the meeting and return after the closed/executive session.

4. EXECUTIVE DIRECTOR'S COMMENTS

Executive Director Howard Ray, Jr. reported on the passing of Security Chief Crystal Kidd. Executive Director Ray remembered Crystal Kidd as a committed individual. Mr. Ray stated that he met Crystal Kidd as a young correctional officer who was ambitious and curious about corrections. Executive Director Ray stated that Crystal Kidd was a committed DAI who always gave her best to the auditing process. Executive Director Ray stated that Crystal Kidd will always be remembered.

5. CONSIDERATION OF FINAL REPORTS

• BROCKBRIDGE CORRECTIONAL FACILITY

Senior Correctional Program Specialist Cheryle Moyer reported on the audit of the Brockbridge Correctional Facility which was conducted May 14-17, 2019 by Commission staff and two Duly Authorized Inspectors. The Brockbridge Correctional Facility is located in Jessup, Maryland. The facility houses male pre-release and minimum security inmates. The facility is under the Administrative Authority of Warden Jama Acuff. The facility is managed daily by Acting Facility Administrator Charles Mitchell. After a thorough review of the required documentation, the Brockbridge Correctional Facility was found to be in substantial compliance with the standards for an Adult Correctional Institution. The identified deficiencies are as follows: Records of annual facility searches were not available for the audit period of 2016, 2017 and 2018, as required by policy and the standard. Records of the quarterly inspection of keys were not available for all areas of the facility where keys are stored for the following: 3rd and 4th quarter for year 2016; 1st, 2nd, 3rd and 4th quarter of year 2017; 1st, 2nd, 3rd and 4th quarter of year 2018; and 1st quarter for year 2019, as required by policy and the standard. Records of quarterly inspections for tools were not available for review for the entire audit period of July 1, 2016 to May 1, 2019, as required by the policy and the standard. Records of daily inventories for the landscaping, sanitation, paint department and barbershop supplies for clippers and blades in barber boxes 1-4 were not available for the entire audit period of July 1, 2016 to May 1, 20019, as required by policy and the standard. Issue and return records were not available for landscaping, warehouse sanitation, and the paint department for the entire audit period of July 1, 2016 through May 1, 2019 as required by policy and the standard. Records of motor vehicle license checks for staff authorized to transport inmates were not available for year 2017 and 2018, as required by policy and the standard. A fire safety inspection was not conducted for the year 2017, as required by policy and the standard. Quarterly fire drills were not consistently conducted on each of the following shifts: 1st quarter 2017, March conducted on any shift; 3rd quarter, July 2018 and 2nd quarter, April 2019, there were no fire drills conducted on any shift, as required by policy and the standard. A comprehensive health inspection was not conducted by the Department of Health and Mental Hygiene for years 2017 and 2018, as required by the standard. Records of initiation and provision for special diets were not available for July 2016 to December 2017, as required by the standard and policy. Quarterly inspection records for kitchen utensils were not available for the entire audit period of July 1, 2016 to May 14, 2019 as required by policy and the standard. Quarterly inspections and inventories to include issue and return records were not available for October to December of 2017, January 1 to December, 2018 and January 1 to May 14, 2019, as required by policy and the standard. Records of exchange for inmate laundry were not available for July 1, 2016 to October 2018, as required by policy and the standard.

Records for LASI/LIPS (Library Assistance to State Institution) requests for the period of June 2016 through May 2017, and library sign in sheets for the period of June 2016 through May 2019 were not available to assess the inmates' access to legal reference materials, as required by the standard. Warden responses and inmate withdrawals regarding inmate internal complaints (Administrative Remedy Process) were not provided within the timeframes and deadline extensions were not met, in accordance with policy DOC.185.0002 and COMAR 12.02.28, during the period of June 2016 through December 2018, as required by the standard. Records for the documentation (i.e. Barber Equipment Worksheets and Barbershop Inmate Sign In List) of inmates' personal grooming and the use of barbering equipment were not available for the period of June 2016 through November 2017, to assess the inmates' access to personal grooming, as required by the standard. Records of confiscation and receipts of inmate funds were not available for the entire audit period of June 2016 – May 2019, as required by policy and the standard. Prior to the audit, the facility submitted the required pre-audit template materials/facility information, ACI worksheets, and the tour list to MCCS for review. During the audit, primary and secondary documentation was available for auditor review in the multi-purpose conference room. Other audit documentation was located in the audit coordinators office and in areas where the specific functions occur at the facility. The Audit Coordinator and the Acting Facility Administrator were available to assist auditors in order to locate documentation, answers questions on an as needed basis. During the review of the documentation, auditors noticed that some documentation lacked organization. The emergency plans, post orders, manuals of standard operation procedures and inmate orientation materials were reviewed by auditors. They were found to be current, beneficial and responsive to the needs of correctional staff and the inmates. The facility tour was conducted by three groups of auditors. The facility arranged for assigned escorts to accompany auditors to all areas of the facility. During the tour, auditors noted maintenance, plumbing and sanitation issues. The majority of these issues were addressed prior to the closure of the audit. For issues that required additional time to repair, work requisition orders were submitted to MCCS by the facility. These issues include: deep freezers with ice build-up located in the kitchen, a light out in a refrigerator located in the kitchen; no hot water, missing ceiling tiles and a ceiling leak, located in the old school building; broken front and rear light fixtures located in the Howard Dormitory; two broken windows located in recreation room number 1 and 2; missing ceiling panels, holes in the ceiling, band boarded windows in telephone room number 202 and 203; missing faucet handle for sink located in the gym bathroom; and two inoperable lights located in the auditorium. The Department of Public Safety and Correctional Services (DPSCS) Managing for Results (MFR) initiatives includes specific core objectives that address compliance with the minimum standards for places of adult confinement. Outlined below are the results for those objectives:

- Percent of applicable inmate safety standards met 76%
- Percent of applicable inmate well-being standards met
 - *Medical, Dental and Mental Health 100%
 - *Food Service 70%
 - *Housing and Sanitation 77%

The compliance results are incorporated as part of this report for the DPSCS MFR 2019 fiscal year reporting requirements. The Maryland Commission on Correctional Standards will conduct a monitoring visit on Tuesday, August 11, 2020 at 10:00 a.m., to assess compliance with the standards found in non-compliance at the audit. Once compliance has been determined, the Brockbridge Correctional Facility will be recommended to receive the Recognition of Achievement Award.

Major T.D. Reece welcomed comments from the representatives of the Brockbridge Correctional Facility. Warden Jama Acuff reported that she is the former warden of the Brockbridge Correctional Facility. Warden Acuff stated that she was the warden of the Brockbridge Correctional Facility at the time of the audit. Warden Acuff announced that Carol Harmon is the new warden of the Brockbridge Correctional Facility which falls under the Maryland Correctional Pre-Release System. Warden Acuff reported that of the seventeen non-compliances that were cited at the time of the audit, eight of the non-compliances have been corrected. Warden Acuff stated during a telephone conversation with Executive Director Howard Ray, Jr., she reported on the plan that was developed by the Division of Correction well over a year ago regarding repurposing the Brockbridge Correctional Facility. She stated that also during the conversation with Executive Director Ray she inquired about closing out the audit process regarding the audit that was conducted (May 14-17, 2019) and re-starting the audit process when the facility is repurposed within a year. Commissioner Wayne Hill requested that it should be noted for the record and to avoid any confusion that the Brockbridge Correctional Facility is not closed. Commissioner Hill stated that the facility was depopulated with future plans to repurpose the facility.

Interim Chairperson T.D. Reece invited comments/questions from the Commission members. Executive Director Howard Ray, Jr., commented that closure and depopulation have different meanings. Executive Director Ray stated that a closure of a facility means that all operations have ceased with no future plans to house inmates. Executive Director Ray stated that to depopulate a facility means that the facility engaged in the movement/transfer of inmates to other correctional facilities with future plans to repurpose the facility.

Interim Chairperson T.D. Reece entertained a motion and vote to accept the audit report as written with a caveat that a monitoring visit will not be conducted regarding the Brockbridge Correctional Facility. Dr. Maria Elmo made a motion to approve the audit report and Ms. Delores Alexander seconded. The vote to approve the audit report as written with the noted caveat was unanimous. Commissioner Wayne Hill abstained from the voting process.

- **ALLEGANY COUNTY DETENTION CENTER**

Correctional Program Specialist Regina Russell reported on the audit of the Allegany County Detention Center which was conducted on June 18-20, 2019 by Commission staff and three Duly Authorized Inspectors. The Allegany County Detention Center is located in Cumberland, Maryland. The facility houses male and female sentenced and pretrial inmates. The facility comes under the administrative authority of Sheriff Craig Robertson and is managed

daily by Captain Daniel Lasher, Assistant Administrator. After a comprehensive and thorough review of the required documentation, the Allegany County Detention Center was found to be in substantial compliance with the standards for an Adult Detention Center. The identified deficiencies are listed below: Documentation for the quarterly inspections of kitchen utensils were not available for 2016 (3rd and 4th Qtrs.), 2017 (1st, 2nd, 3rd and 4th Qtrs.), 2018 (1st, 2nd, 3rd, and 4th Qtrs.), 2019 (1st Qtr. and April 1, 2019 through June 1, 2019) of the audit period, as required by the standard. Issue and return records for the Shadow Box Utensil Movement Log forms were not available from February 5, 2017 through September 5, 2017 and September 28, 2017 through June 1, 2019 of the audit period, as required by the standard. Records of disciplinary hearings did not provide documentation for the managing official or designee of the hearing decisions; nor were reports available of all hearing decisions to the managing official or designee during the audit period of July 1, 2016 through June 1, 2019, as required by the standard. Pre-audit materials were submitted to MCCS staff for review prior to the audit. The majority of the secondary documentation was organized, located and reviewed by auditors, in the training room. Other primary and secondary documentation was located in areas where the specific functions occur at the facility. The manuals of standard operating procedures, post orders, emergency plans, and inmate orientation materials were reviewed by auditors and found to be functional, instructional and responsive to the needs of inmates, correctional staff and public safety. The audit coordinator and other correctional staff were available to escort the audit team, answer questions, and provide documentation to auditors upon request. Three groups of auditors were escorted throughout the facility. The physical plant was in excellent condition and a high level of sanitation was maintained throughout the facility. Minor maintenance issues were noted by the tour groups. Work orders were submitted to MCCS to indicate that the necessary repairs will be completed after the audit for the replacement of a cold water handle on a kitchen sink and one inoperable telephone in the visitation area. Overall the physical plant was in exceptional condition during the tour of the facility demonstrating the commitment of both staff and inmates. The Maryland Commission on Correctional Standards will conduct a monitoring visit on Monday, August 24, 2020 at 11:00 a.m., to assess compliance with the three standards found in noncompliance at the initial audit. Once compliance has been determined, the Allegany County Detention Center may be recommended for the Recognition of Achievement Award. In conclusion, the Allegany County Detention Center is managed by staff who is committed to the audit process. The management is supportive and recognizes the standards as an important tool to ensure compliance with the standards for an Adult Detention Center. The county administration is encouraged to continue to provide the necessary support and resources to maintain a high level of achievement.

Interim Chairperson T.D. Reece welcomed comments from the representative of the Allegany County Detention Center. Officer Iosefa Pua'auli stated that he was the representative for the Allegany County Detention Center on behalf of Captain Daniel Lasher (Assistant Administrator). Officer Pua'auli reported that Captain Lasher was not present at the meeting due to staffing shortages. Officer Iosefa Pua'auli reported that he serves as the audit coordinator for the Allegany County Detention Center. Office Iosefa introduced Officer Chad Guthrie who accompanied him to the meeting. Officer Pua'auli addressed the three deficiencies that were

cited during the audit. He stated that the three deficiencies cited during the audit have all been corrected. Officer Pua'auli reported that the noncompliance regarding standard .03 J (3) Kitchen Utensils was due to a transition in the kitchen staff in which a new kitchen staff was hired during the audit period. He stated that the new kitchen staff is under better management which will ensure compliance with standard .03 J (3) Kitchen Utensils.

Interim Chairperson T.D. Reece welcomed comments and questions from the Commission members. Interim Chairperson Reece inquired about the timeframe of the transition. Officer Pua'auli responded that a transition took place with the retirement of the previous assistant administrator in 2018. Officer Pua'auli stated that the deficiencies are partly due to poor communication on his part with the individuals who were responsible for overseeing that the process and documentation were being maintained. Officer Pua'auli reported that better communication has been established. He stated that he is engaged in weekly and monthly communication with managers to ensure the process is being completed and the documentation is maintained to substantiate compliance with the standards. Interim Chairperson Reece inquired about the contractor regarding the kitchen. Officer Pua'auli responded that it is the same contractor, but there were issues with the manager who was responsible for overseeing the kitchen area.

Interim Chairperson T.D. Reece entertained a motion and vote to accept the audit report. Commissioner Michael Resnick made a motion to accept the audit report and Dr. Maria Elmo seconded. The vote to approve the audit was unanimous.

- **YOUTH DETENTION CENTER**

Mr. Brian Raivel reported on the audit of the Youth Detention Center which was conducted on June 4-6, 2019 by Commission staff. The Youth Detention Center opened in September 2017 and is no longer a component of the Metropolitan Transition Center. YDC serves as a separate institution within the Division of Pretrial and Detention Services. YDC is a three-story, dormitory style, juvenile facility located in Baltimore, Maryland. The facility houses male and female detainees and inmates, under the age of 18, who have been waived from juvenile court to criminal court and/or alleged to have committed or convicted of an exclusionary offense. The security levels are maximum to prerelease. The center is under the authority of Commissioner Michael Resnick and is managed daily by Facility Administrator Dehavilland Whitaker. After a thorough review of the required documentation, the Youth Detention Center was found to be in substantial compliance with the majority of the standards for an Adult Detention Center. The identified deficiencies are: A fire safety inspection was not conducted to ensure that the facility meets all fire safety regulations as verified by an annual inspection conducted by the Fire Marshal in 2018, as required by the standard. Records of quarterly inspections and inventories and the issue and disposal of toxic, caustic and flammable materials were not available for the audit period of June 2018 through June 2019, as required by the standard. Records of the return of inmate clothing (uniforms) were not available for the audit

period of June 2018 through June 2019, as required by the standard. Records of the return of inmate bedding and linen were not available for the audit period of June 2018 through June 2019, as required by the standard. The semiannual inventory of property retained by the facility was not conducted for the audit period of June 2018 through December 2018, as required by the standard. Records demonstrating the availability of legal reference materials were not available for pretrial detainees or sentenced inmates for the audit period of June 2018 through June 2019, as required by the standard. Records of inmate legal calls were not available for pretrial detainees nor sentenced inmates for the audit period of June 2018 through August 2018, as required by the standard. Records were not available to demonstrate the inmate's receipt of written notifications of the grievance resolution, as required by policy and the standard. A review of disciplinary hearing reports demonstrated that inmates did not appear at their disciplinary hearings within 9 days of the alleged infractions, as required by the standard. The administration and staff were prepared for the audit. Pre-audit materials were submitted to the MCCS office. Most of the secondary documentation was located in the multi-purpose room. Other documentation was located in specific units or areas where those functions occurred. The facility staff was available to escort audit team members to areas of the facility, answer questions, and assist audit team members, on an as needed basis. Due to the assistance and preparation of the facility staff, the audit team was able to conclude the audit within three days, instead of the originally scheduled four days for the MCCS audit. The management staff is in the process of finalizing the facility's emergency plans, post orders, policies, procedures, and inmate orientation materials. DPSCS and DPDS' policies and facility post orders are currently utilized for the daily operations within the facility. The auditors toured the facility in three groups, escorted by the facility staff. Overall, the facility was found to be in exceptional condition, on the day of the audit. The facility staff submitted work orders regarding areas cited by the auditors which needed additional time for repair. Specific issues, pending repair, are the water pressure in infirmary rooms 137, 138 and 140, paint the D-pod light switch and remove graffiti from the dayroom rocking chair and the walls in cell B-18. The majority of items cited during the tour were addressed by facility staff, prior to the conclusion of the audit. During the tour, the facility was found to be orderly and sanitary. The Department of Public Safety and Correctional Services (DPSCS) Managing for Results (MFR) initiative includes specific core objectives that address compliance with the minimum standards for places of adult confinement. Outlined below are the results for these objectives:

• Percent of applicable inmate security standards met	100%
• Percent of applicable inmate well-being standards met	
* Medical, dental and mental health	100%
* Food Service	100%
* Housing and Sanitation	56%

The compliance results are incorporated as a part of this audit report for the DPSCS MFR 2019 fiscal year reporting requirements. The Maryland Commission on Correctional Standards will conduct a monitoring visit to assess compliance of the non-compliant standards, on Thursday, August 13, 2020 at 10:00 a.m. Once the compliance has been determined, the Youth Detention

Center will be recommended to receive the Recognition of Achievement Award. In conclusion, the Youth Detention Center is managed by professional, experienced and dedicated staff, who strive to integrate the standards into the daily operations of the facility. With the assistance of the staff, MCCA was able to conduct the initial audit at YDC within 3 days of the 4 days scheduled for the MCCA audit. The Department of Public Safety and Correctional Services should continue to provide the needed support and resources to achieve total compliance with the standards for an Adult Detention Center.

Interim Chairperson T.D. Reece welcomed comments from the representatives of the Youth Detention Center. Executive Director Howard Ray, Jr., commented that normally an audit is scheduled for a three year period; however the Youth Detention Center was a new facility. He commented that the audit of the facility was scheduled within eighteen months of the opening of the facility. Executive Director Ray stated that the facility did a tremendous job in preparing for the audit. Facility Administrator Dehavilland Whitaker expressed appreciation to Executive Director Ray for his comments. Facility Administrator Whitaker introduced the staff who accompanied her to the meeting (Officer Shawntae Smith, Environmental Fire Safety Officer, Lieutenant Terry Edwards and Officer Ashley Wright). Facility Administrator Whitaker stressed that the facility was still putting things in place at the time of the arrival of the audit team. Facility Administrator Whitaker reported that the administration and staff have worked very hard to correct the cited deficiencies. Facility Administrator Whitaker assured the Commission members that the facility will be prepared at the time of the scheduled monitoring visit.

Interim Chairperson T.D. Reece invited comments/questions from the Commission members. Interim Chairperson Reece commented that it is extremely difficult to open a new facility. He stated that for most managing officials the audit is a blessing in disguise. Interim Chairperson Reece stated that we are very fortunate and blessed to have standards and the Standards Commission to serve as a guide to provide insight on the operations of the facilities. Facility Administrator Whitaker agreed with the comments of Interim Chairperson Reece. Facility Administrator Whitaker stated that the audit was a learning experience that provided valuable insight for the administration and staff.

Interim Chairperson T.D. Reece entertained a motion and vote to accept the audit report. Ms. Delores Alexander made a motion to approve the audit report and Director Terry Kokolis seconded. The vote to approve the audit report was unanimous. Commissioner Michael Resnick abstained from the voting process.

- **MARYLAND CORRECTIONAL TRAINING CENTER**

Senior Correctional Program Specialist Cheryle Moyer reported on the audit of the Maryland Correctional Training Center which was conducted on July 16-19, 2019 by Commission staff and nine Duly Authorized Inspectors. The Maryland Correctional Training Center first opened in 1942; it expanded and assumed its current name in 1964. Located in Hagerstown, Maryland, MCTC is a reception facility that processes new inmates and

transportation hub for the Western Region. MCTC is one of the largest single-compound correctional institutions and pre-release facility in the State of Maryland. The facility houses male inmates classified at the minimum, medium, and pre-release levels of security. The facility is under the administrative authority of Commissioner Wayne Hill and is managed daily by Warden Richard Dovey. Based on a thorough review of the required audit documentation, the Maryland Correctional Training Center was found to be in substantial compliance with all the standards for an Adult Correctional Institution. The following deficiency is listed below: Signatures were not documented on the DPSCS Notice of Confiscation and Inmate Personal Property Disposition Form # 220-004DR; for the confiscating officer, the institutional officer and the served by officer on the majority of the forms reviewed, for the entire audit period of August 1, 2016 through July 16, 2019, as required by the standard. Pre-audit materials were submitted to the MCCA Staff for review prior to the audit. The majority of the primary and secondary documentation was found to be organized. Audit documentation was reviewed in the audit coordinator's office. Other documentation was reviewed in the areas of the facility where the specific unit functions occur. Facility staff was available to answer questions, retrieve specified audit documentation, assist with computer access and provide escorts to the auditors to specific areas of the facility. Auditors reviewed institutional policies, procedures, post orders, emergency plans and inmate orientation materials. These directives were found to address the needs of the institutional staff, inmates and the community. Standard .01 Q Separation of Sexes was found to be non-applicable to this adult correctional institution (MCTC). Auditors reviewed institutional policies, procedures, post orders, emergency plans and inmate orientation materials. These directives were found to address the needs of the institutional staff, inmates and the community. Standard .01 Q Separation of Sexes was found to be non-applicable to this adult correctional institution (MCTC). Five groups of auditors conducted the facility tour. The facility tour included the MCTC and HED compounds. Minor maintenance and plumbing issues were cited by auditors. The majority of these issues were addressed prior to the conclusion of the audit. For issues that required additional time to repair, work orders were submitted to MCCA. The areas cited for additional repair were as follows: the replacement of missing institutional ceiling tile, emergency cell lights, fluorescent lamps and lamp holders located in various locations; the repair of washing machines, located at HU #1 D-Tier and HU #3 A-Tier; inoperable light switch, located at HU #8 C-Tier; cell lighting issues in various locations throughout HU #1-6; two lights out in the kitchen due to damaged tube sockets; and peeling paint on the visiting room door (A-112-C). Management must continue to be proactive to ensure that all maintenance issues are addressed, in order to comply with facility safety requirements. The facility was found to have a high level of sanitation and was in good condition. The Department of Public Safety and Correctional Services (DPSCS) Managing for Results (MFR) initiative includes specific core objectives that address compliance with the minimum standards for places of adult confinement. The results for these objectives are outlined below:

- | | |
|---|------|
| • Percent of applicable inmate security standards met | 100% |
| • Percent of applicable inmate well-being standards met | |
| *Medical, dental and mental health | 100% |
| *Food Service | 100% |
| *Housing and Sanitation | 88% |

The compliance results are incorporated as a part of this audit report for the Department of Public Safety and Correctional Services MFR 2020 fiscal year reporting requirements. The Maryland Commission on Correctional Standards will conduct a monitoring visit, on Tuesday, August 24, 2020 at 11:00 a.m., to assess compliance with the one non-compliant standard from the initial audit. Once compliance has been determined, the Maryland Correctional Training Center will be recommended to receive the Recognition of Achievement Award. The Maryland Correctional Training Center staff members are committed to the use of the standards as an effective management tool in their daily institutional operations. Management utilizes the standards to provide a safe and clean environment for staff, inmates and the community. The Maryland Department of Public Safety and Correctional Services are encouraged to continue to provide the resources necessary to promote total compliance, with all the standards for an Adult Correctional Institution.

Interim Chairperson T.D. Reece welcomed comments from the representatives of the Maryland Correctional Training Center. Warden Richard Dovey introduced the staff who accompanied him to the meeting (Sergeant Johnnavin McKinley, Audit Coordinator, Assistant Warden William Bohrer, Security Chief Joseph Lohman and Facility Administrator Bethany Cornachia). Warden Dovey expressed appreciation to the Commission staff. He stated that he greatly appreciated the audit team for visiting the facility. Warden Dovey commented on the professionalism of the auditors. Warden Dovey commented that the audit process makes the facility better. Warden Dovey reported on the one deficiency cited regarding standard .04 I (3) Inmate Property Management. Warden Dovey reported on the steps that were implemented in order to correct the deficiency regarding standard .04 I (3) Inmate Property Management. He stated that the staff was educated at roll call and each staff member had to read/sign off on the policy pertaining to the confiscation form. Warden Dovey reported that the property room staff was also educated on the process regarding the confiscation form so that they also understand the importance of the signature regarding the confiscation form. Warden Dovey reported that it is evident through conducting spot checks that the newly implemented process is going very smoothly. He assured the Commission members that the facility will be in compliance with standard .04 I (3) Inmate Property Management at the time of the scheduled monitoring visit. Warden Dovey also reported that as a result of the MCCS audit, the Maryland Correctional Training Center attained accreditation by the American Correctional Association.

Interim Chairperson Reece welcomed comments/questions from the Commission members. Interim Chairperson Reece asked for clarification regarding the deficiency cited for standard .04 I (3) Inmate Property Management. Warden Dovey responded that the deficiency was related to excess property and confiscated property and how the property was being collected.

Interim Chairperson T.D. Reece entertained a motion and vote to accept the audit report. Commissioner Michael Resnick made a motion to approve the audit report and Ms. Delores Alexander seconded. The vote to approve the audit report was unanimous. Commissioner Wayne Hill abstained from the voting process.

• **CENTRAL MARYLAND CORRECTIONAL FACILITY**

Correctional Program Specialists Regina Russell reported on the audit of the Central Maryland Correctional Facility which was conducted on July 30-August 2, 2019 by Commission staff and three Duly Authorized Inspectors. The Central Maryland Correctional Facility, constructed in 1960, is located in Sykesville, Maryland. The facility houses male minimum and pre-release security inmates. The facility is under the administrative authority of Warden Jama Acuff and is managed daily by Acting Facility Administrator Nate' Denton. After a thorough review of the required documentation, the facility was found to be in compliance with the majority of the standards for an Adult Community Correctional Facility. The identified deficiencies are: A Fire Safety Inspection was not conducted in 2018 by the State Fire Marshal and the 2019 Fire Safety Inspection noted that the fire alarm system is inoperable in Control and the Boiler building and no sprinkler system protection was available for the sleeping areas of the Howard, Carroll, Frederick and Baltimore dormitories, as required by the State Fire Safety codes and the standard. Inmate orientations were not conducted within the seven days of the inmates' admission for 47% of the case files reviewed, as required by the standard. Records for the annual review of official publications were not available for 2016, 2018 and 2019 of the audit period of September 2016 through July 2019, as required by the standard. Pre-audit materials were submitted to the MCCS staff for review prior to the audit. The majority of the secondary documentation was organized and reviewed by auditors, in the audit office, conference room and the case management area. Other primary and secondary documentation was located in areas where the specific functions occur at the facility. The manuals of standard operating procedures, post orders, emergency plans, and inmate orientation materials were reviewed by auditors. Management was encouraged to ensure that official publications are reviewed annually to provide functional, instructional and responsive information to fulfill the needs of inmates, correctional staff and public safety. The audit coordinator and other correctional staff were available to escort the audit team, answer questions, and provide documentation to auditors upon request. Standard .01 N Separation of Sexes was not applicable to the Central Maryland Correctional Facility; because, it only houses sentenced male inmates. The Department of Public Safety and Correctional Services (DPSCS) Managing for Results (MFR) initiative includes specific core objectives that address compliance with the minimum standards for places of adult confinement. Outlined below are the results for these objectives:

• Percent of applicable inmate security standards met	100%
• Percent of applicable inmate well-being standards met	
* Medical, dental and mental health	100%
* Food Service	100%
* Housing and Sanitation	100%

The compliance results are incorporated as part of this audit report for the Department of Public Safety and Correctional Services MFR 2020 fiscal year reporting requirements. The Maryland Commission on Correctional Standards staff will conduct a monitoring visit on Tuesday, August 18, 2020 at 10 a.m., to assess compliance with the three minimum mandatory standards found in noncompliance at the audit. Once compliance has been determined, the Central Maryland Correctional Facility may be recommended to receive the Recognition of Achievement Award.

The Central Maryland Correctional Facility should continue to strive to incorporate the standards in their daily operations for use as an effective management tool and promote total compliance. The Department of Public Safety and Correctional Services are mandated to provide the support and necessary resources to enable the Central Maryland Correctional Facility to obtain total compliance with the standards.

Interim Chairperson T.D. Reece welcomed comments from the representatives of the Central Maryland Correctional Facility. Facility Administrator James Harris introduced Assistant Facility Administrator Nate' Denton, who accompanied him to the meeting. Facility Administrator James Harris commented on the professionalism of the audit team. He commended the audit team on their performance during the audit. Facility Administrator Harris commented that the audit process is very important, as it helps the facility understand where the shortcomings are and aids the facility in making the necessary adjustments to reach their goals. Facility Administrator Harris addressed the three non-compliances cited during the audit. Facility Administrator Harris reported on the non-compliance regarding standard .02 A Fire Safety Inspection. Facility Administrator Harris stated that it is an ongoing effort along with the Environmental Fire Safety Officer to get the Fire Marshal to come out and re-inspect the facility. He reported that there have been some corrections and repairs made regarding the fire alarm system in the report dated September 30, 2019. Facility Administrator Harris stated that they are waiting on the Fire Marshal to come out and conduct a re-inspection to address the repairs. Facility Administrator Harris addressed the issues regarding altering of the fire suppression system when the facility was built in 1960. He stated that the reports indicate that there has not been an alteration to the fire suppression system. Facility Administrator Harris provided reports regarding the fire suppression system. He reported that he is also waiting on the Fire Marshal's visit to inspect and address the matter regarding the fire suppression system. Facility Administrator Harris explained that the deficiency regarding standard .08 D Official Publications/Annual Review was due to the inability to locate the necessary documentation at the time of the audit. He reported that the documentation was located and will be available at the scheduled monitoring visit.

Interim Chairperson T.D. Reece invited comments/questions from the Commission members. Interim Chairperson Reece inquired about the non-compliance cited regarding standard .05 F Inmate Orientation. Facility Administrator Harris stated that standard .05 F Inmate Orientation was easily corrected. Facility Administrator Harris explained that inmate orientation was previously conducted once a week during the seven day period. Facility Administrator Harris reported that inmate orientation is now conducted twice a week. He stated that inmate orientation has been conducted twice a week since the audit.

Interim Chairperson T.D. Reece entertained a motion and vote to accept the audit report. Ms. Delores Alexander made a motion to approve the audit report and Dr. Maria Elmo seconded. The vote to approve the audit report was unanimous. Commissioner Wayne Hill abstained from the voting process.

- **ST. MARY'S COUNTY DETENTION AND REHABILITATION CENTER**

Senior Correctional Program Specialist Cheryle Moyer reported on the audit of the St. Mary's County Detention and Rehabilitation Center which was conducted on August 20-22, 2019 by Commission staff and five Duly Authorized Inspectors. The Saint Mary's County Detention and Rehabilitation Center houses male and female sentenced and pretrial inmates. The Detention and Rehabilitation Center is centrally located in Leonardtown, Maryland. The facility comes under the administrative authority of Sheriff Timothy K. Cameron. The facility is managed daily by Major Deborah Diedrich, who serves as the Warden. Primary and secondary documentation was thoroughly reviewed by auditors. After a comprehensive and thorough review of the required documentation, the Saint Mary's County Detention and Rehabilitation Center was found to be in total compliance with all of the standards for an Adult Detention Center. Prior to the audit, pre-audit materials were submitted to the MCCS staff for review. Primary and secondary documentation was available for review in the multipurpose room. Other documentation was located in the areas of the detention center where the specific functions occur. Overall the audit process was a smooth process. The audit documentation was found to be very well organized. Auditors were able to easily access and review audit documentation on the computer and within file folders. Staff stood nearby to eagerly assist auditors, when requested. The audit coordinator and assigned facility staff provided auditors with additional documentation upon request. The detention center's policies, procedures, post orders, orientation materials, and emergency plans were provided for auditor review and were found to be comprehensive and thoroughly address the needs of the inmates, correctional staff and the community. This high level of organization and preparation allowed the facility to achieve compliance with the standards. The facility was found to be in good condition, clean and sanitized, during the tour. It was obvious to auditors, that the correctional staff and inmates take pride in facilitating efforts to maintain the sanitation and cleanliness of this facility on a regular, routine and consistent basis. The tour of the facility was performed by three groups of auditors. Very minor maintenance issues were cited by the auditors. The majority of these cited areas were addressed prior to the conclusion of the audit. Work orders were submitted to MCCS staff for plumbing and maintenance issues that required additional time to repair. These areas include the following: a clogged sink in A Pod, a water fountain with low water pressure in B Pod, a water fountain with a loose button in B Pod, a clogged sink located in the kitchen, cell C located in D Pod has no hot water, within E Pod there was an inoperable toilet located in the dayroom, no cold water in cell #218, no cold water in cell #122, an inoperable button on toilet in the dayroom and the indoor recreation room was missing a light cover. The facility staff demonstrated high standards for sanitation in all areas of the detention center.

Interim Chairperson T.D. Reece welcomed comments from the representatives of the St. Mary's County Detention and Rehabilitation Center. Warden Deborah Diedrich introduced the staff members who accompanied her to the meeting (Deputy Warden Mary Ann Thompson, Lieutenant Saraha Norris, Audit Coordinator and Captain Michael Pilkerton). Warden Diedrich commented that the St. Mary's County Detention and Rehabilitation Center looks forward to the audit as the report card for the facility. Warden Diedrich stressed that she cannot say enough good things about the auditors. She stated that they understand that the auditors have such a tough job, but they come in and they make the process very smooth and comforting to all.

Interim Chairperson T.D. Reece entertained a motion and vote to accept the audit report and grant the Recognition of Achievement award. Deputy Director Nelson Reichart made a motion to approve the audit report/grant the Recognition of Achievement award and Ms. Delores Alexander seconded. The vote to approve the audit report and grant the Recognition of Achievement award was unanimous. The Commission members congratulated the administration and staff of the St. Mary's County Detention and Rehabilitation Center on their achievement. The St. Mary's County Detention and Rehabilitation Center was presented with the Recognition of Achievement award. A photo of the presentation was captured by Assistant Executive Director Veronica Moore.

6. CONTINUING BUSINESS

MONITORING REPORTS (Agenda modified to accommodate travel time of facility)

• WICOMICO COUNTY DEPARTMENT OF CORRECTIONS

Correctional Program Specialist Regina Russell reported on a monitoring visit conducted on August 14, 2019, at the Wicomico County Department of Corrections. This is the first monitoring visit since the initial audit in August 2018. The initial monitoring visit was conducted by Assistant Executive Director Veronica Moore, Senior Correctional Program Specialist Cheryle Moyer, Correctional Program Specialist Regina Russell and Auditor Brian Raivel. The purpose of the visit was to review the standards that were found in non-compliance during the initial audit. A brief meeting was held with Warden Ruth Colbourne, Deputy Director Thomas Kimball, Deputy Director Michael Jamison, Food Service Director Cheryl Fairbanks, Sergeant Allen Parrish (Audit Coordinator), and other invited staff. The results of the monitoring period from February 1, 2019 through August 1, 2019 were as follows: Standard .01 J (11) Search Procedures was found to be compliance. A review was conducted of the Wicomico County Department of Corrections Daily Inmate Strip Search Log forms for the monitoring period. The forms provided daily accountability for inmate strip searches performed on Block Floors A, B, C and the Busy Hall for general population inmates and assigned inmate workers. The documentation demonstrates compliance with the policy and the standard. Standard .02 K (4) Control of Medical and Dental Instruments was found to be compliant. The records of the Weekly Sharps Inventory Forms were reviewed for the monitoring period. A physical inventory was conducted of the dental needles and syringes temporarily located in the pharmacy of the medical department. The inventory and the individual needle and syringe records demonstrated that the dental needles and syringes were accounted for in the medical department. The Weekly Sharps Inventory records demonstrated that dental's needles and syringes were inventoried weekly during the monitoring period, as required by the standard. The Wicomico County Department of Corrections dental department was found compliant with the weekly inventories of the needles and syringes. Standard .03 E Dietary Medical Screenings was found to be compliant. A memorandum listed the correctional dietary employees and inmate dietary workers

currently employed and assigned to work in the dietary department. The correctional dietary employees and inmates' employment and assignment dates were provided for review, in addition to the Correct Care Solutions/Wicomico County Detention Center Employee Physical Examination Records. Based on the records provided, both the employees and inmates, who were assigned to work in the dietary department during the monitoring period, received a dietary medical screening and were medically cleared to work in the dietary department, as required by the standard. The inspection reports were reviewed from other regulatory agencies. The State Fire Marshal's Office conducted an inspection on November 26, 2018, with noted violations. However, they were abated on December 30, 2018. The Maryland Department of Health and Mental Hygiene conducted an inspection on October 24, 2018 with noted violations which were corrected on site. Dietician Wendy Anne Johnson (Lic. #DX4112) approved the dietary menus for fiscal year 2020, on September 12, 2019. A MOSH Inspection was conducted on July 2, 2018 by George Penyak, with noted violations. The hazards were abated on July 2, 2018 and August 16, 2018. After a thorough review of the secondary documentation for the three non-compliant standards, the facility was found to be in total compliance with all the standards for an Adult Detention Center. The Wicomico County Department of Corrections is recommended to receive the Recognition of Achievement Award.

Interim Chairperson T.D. Reece welcomed comments from the representatives of the Wicomico County Department of Corrections. MCO Parrish stated that he is the audit coordinator for the Wicomico County Department for Corrections. MCO Allen Parrish introduced the staff who accompanied him to the meeting (Major Preston Foreman, Chief of Security and Britney Stevenson, Assistant Audit Coordinator). MCO Parrish expressed appreciation to the auditors for conducting a complete and thorough audit of the Wicomico County Department of Corrections. He commented that the audit is an experience that the facility looks forward to. He stated that the audit process shows the facility where they may need to tweak specific areas. MCO Parrish reported that since the last audit, the facility experienced a transition regarding a new warden as well as a new medical staff. He commented that the audit helped to identify shortfalls that the facility was already on top of but failed to meet compliance due to a lack of documentation. MCO Parrish stated that he feels very strongly moving forward regarding the facility's ability to achieve total compliance with the non-compliant standards.

Interim Chairperson T.D. Reece invited comments/questions from the Commission members. Interim Chairperson Reece inquired about the adjustments that were made by the facility in order to meet compliance regarding the three non-compliant standards. MCO Allen Parrish provided an explanation regarding the non-compliance that was cited for standard .01 J (11) Search Procedures. He stated that he discovered a shortfall in the area prior to the audit and the non-compliance was due to a lack of documentation for audit period. MCO Parrish reported that a new process is in place regarding the strip searches. He reported that a new form was developed for each housing unit where the strip searches are conducted. MCO Parrish reported

that the form is now turned in daily. MCO Parrish provided an explanation regarding the non-compliance that was cited for standard .02 K (4) Control of Medical and Dental Instruments. He reported that the physical inventory of needles and syringes regarding the medical and dental departments were being accounted for bi-weekly instead of weekly. MCO Parrish reported that the medical director was new and was not aware of the process. He reported that he is in constant communication with the medical director to ensure the process is performed correctly in order to meet compliance with the standard. MCO Parrish provided an explanation regarding the non-compliance that was cited for standard .03 E Dietary Medical Screening. He explained that the non-compliance was due to one kitchen employee who received a medical screening; however, it was outside of the twelve month requirement. MCO Parrish reported that the process moving forward will be to have all dietary employees receive a medical screening in the same month every year.

Interim Chairperson T.D. Reece entertained a motion to vote and approve the monitoring report and grant the Recognition of Achievement award. Deputy Director Nelson Reichart made a motion to approve the monitoring report and grant the Recognition of Achievement award and Dr. Maria Elmo seconded. The vote to approve the report and grant the Recognition of Achievement award was unanimous. The Commission members congratulated the administration and staff of the Wicomico County Department of Corrections on their achievement. The Wicomico County Department of Corrections was presented with the Recognition of Achievement award. A photo of the presentation was captured by Assistant Executive Director Veronica Moore.

- **NORTH BRANCH CORRECTIONAL INSTITUTION**

Mr. Brian Raivel reported on the monitoring review conducted on August 8, 2019, at the Maryland Commission on Correctional Standards office for the North Branch Correctional Institution. The review was conducted by Auditor Brian Raivel (Lead) and Correctional Program Specialist Regina Russell. The purpose was to review the standards found in non-compliance at the initial audit conducted in July 2018. This was the first monitoring visit since the audit. A brief meeting was conducted with Sergeant Anthony Frenzel (Audit Coordinator) and Officer Annie Stott. The results of the monitoring period from February 1, 2019 through August 1, 2019 were as follows: Standard .01 M (1) Transportation of Inmates was found to be compliant. A review of the North Branch Correctional Institution Motor Vehicle Administration Licensure (MVA) reports was conducted for the monitoring period. A roster of the security qualified staff who are responsible for inmate transport was provided by the facility. The roster was cross referenced with the monthly Employee State Vehicle Driving Privileges Report and the Placement on Motor Vehicle Administration License Monitoring Service System memos. Based on the review of the reports, it was confirmed that the approved drivers were licensed and permitted to transport inmates, as required by the standard. Standard .05 I Internal Complaint System was found to be compliant. A review was conducted of a random sampling of the 1297 grievances (ARPs) filed during the 6 month monitoring period. The documentation

demonstrated the date the grievance was filed, the date it was received by the ARP Coordinator Lieutenant Johns, the date it was responded to, and the date the of the Wardens approval. There were 120 grievances reviewed and 117 were within the timeframe established by COMAR 12.02.28 and OPS 185.0002, thus establishing compliance with the standard, as required. Standard .07 A (2) Formal Disciplinary Hearing Process was found to be compliant. A comprehensive automated roster of inmates involved in the disciplinary process during the monitoring period was reviewed for the North Branch Correctional Institution. Inmates from this list were randomly chosen for assessment based upon a percentage of the total amount of hearings. A total of 135 disciplinary records were reviewed for the date of infraction, the date the inmate was served the infraction, and the date of hearing. Based on this documentation, the disciplinary hearing process was completed within the required time frames, as required by the standard. Inspection reports were reviewed from other regulatory agencies. The Maryland State Fire Marshall conducted a fire safety inspection on May 13, 2019 that noted 2 violations which were abated on August 7, 2019. The Maryland Department of Health and Mental Hygiene conducted a Food Service Facility Inspection on March 20, 2019, with no violations noted. The dietary menus was reviewed and approved on December 12, 2018 by Scott Steininger, Dietician (Lic. #DO1350). A review was conducted of the materials submitted by the Maryland Department of Labor, Licensing, and Regulations for a MOSH inspection completed on March 08, 2019 with no violations. After a thorough review of the secondary documentation for the three non-compliant standards, the facility was found to be in compliance with all of the standards for an Adult Correctional Institution. The North Branch Correctional Institution is recommended to receive the Recognition of Achievement Award.

Interim Chairperson T.D. welcomed comments from the representatives of the North Branch Correctional Institution. Assistant Warden Jeff Nines reported that he is now Acting Warden. He reported that Mr. Frank Bishop, Jr. (former Warden) was promoted to Commissioner of the western region. Acting Warden Jeff Nines introduced the staff who accompanied him to the meeting (Jeff Brewer, Audit Supervisor and Sergeant Anthony Frenzel, Audit Coordinator). Acting Warden Nines expressed appreciation to the audit team and stated that it is always good to have a new set of eyes come in and identify areas that may need improvement.

Interim Chairperson T.D. Reece welcomed questions from the Commission members. Interim Chairperson Reece commended the administration and staff on the accomplishment of resolving 1,297 grievances in a six month period.

Interim Chairperson T.D. Reece entertained a motion to vote and approve the monitoring report and grant the Recognition of Achievement award. Ms. Delores Alexander made a motion to accept the monitoring report and grant the Recognition of Achievement award and Commissioner Michael Resnick seconded. The vote to approve the report and grant the Recognition of Achievement award was unanimous. Commissioner Wayne Hill abstained from the voting process. The North Branch Correctional Institution was presented with the Recognition of Achievement award. A photo of the presentation was captured by Assistant Executive Director Veronica Moore.

- **FREDERICK COUNTY DETENTION CENTER AND ANNEX**

Mr. Brian Raivel reported on the monitoring visit conducted on August 28, 2019, at the Frederick County Detention Center and Annex. The purpose of the visit was to review the standards found in non-compliance at the initial audit conducted in November 2018. This was the first monitoring visit since the audit. Mr. Raivel reported that the monitoring visit was conducted by Assistant Executive Director Veronica Moore. A brief meeting was held with Assistant Warden (Major) Michael Cronise, Captains Joseph Chrisp and Timothy Selin, Lieutenant Charles Clarke (Audit Coordinator) and other invited staff. The results of the monitoring period from February 1, 2019 – August 1, 2019, were as follows: Standard .02 I (3) Administration of Medications was found to be compliant. A review was conducted of the Individual Stock Medication Records for the dispensing, administration and refusal of medications in the dental department, for the monitoring period. Medications in the dental department were physically inventoried to determine accountability at the monitoring visit. Records demonstrated the date, time, dose, inmate's name, staff's administering name and the remaining balance of the individual medication prescribed to the inmate. The FCDC dental department was found compliant with the standard for the administration of medication, during the monitoring period. Standard .02 K (4, 6) Control of Medical and Dental Instruments – Compliance was found to be compliant. The records of the Frederick County Detention Center Dental's needles and syringes inventory and usage counts were reviewed for the monitoring period. A physical inventory was conducted of the needles and syringes located in the dental department. The individual needle and syringe usage records and the physical inventory demonstrated that the needles and syringes were accounted for in the dental department. The Sharps Usage Control Log provided the date, time, dose, inmate's name and ID number, inventory, and staff's signature of the individual who used the needle or syringe. The Sharps Usage Control Log will also be utilized to document counts at the beginning and at the end of the shift. The FCDC dental department demonstrated accountability for all needles and syringes and was found compliant with the weekly inventories of the needles and syringes, as required by the standard. Inspection reports were reviewed from other regulatory agencies. The Maryland State Fire Marshal's office conducted a fire and safety inspection on January 29, 2019, with no violations at the work release unit and noted violations at the detention center. All violations at the detention center were resolved, as determined by the Fire Marshal's inspection, on February 18, 2019. A comprehensive health inspection was conducted by the Maryland Department of Health and Mental Hygiene on February 22, 2019 with violations noted. A corrective action plan was submitted for the repairs which were remediated, on April 10, 2019. Dietary menus were approved by the Food Service Manager and Certified Dietician Joanne Zacharias (Lic #D00050), on February 12, 2019. The Maryland Occupational Safety Hazard Inspection (MOSH) Inspection was conducted, on November 17, 2017, by George Penyak at the detention center and work release unit. Hazards at the detention center were abated during the inspection and the work release unit had no cited hazards. Inspection reports were reviewed from other regulatory agencies. The Maryland State Fire Marshal's office conducted a fire and safety inspection on January 29, 2019, with no violations

at the work release unit and noted violations at the detention center. All violations at the detention center were resolved, as determined by the Fire Marshal's inspection, on February 18, 2019. A comprehensive health inspection was conducted by the Maryland Department of Health and Mental Hygiene on February 22, 2019 with violations noted. A corrective action plan was submitted for the repairs which were remediated, on April 10, 2019. Dietary menus were approved by the Food Service Manager and Certified Dietician Joanne Zacharias (Lic #D00050), on February 12, 2019. The Maryland Occupational Safety Hazard Inspection (MOSH) Inspection was conducted, on November 17, 2017, by George Penyak at the detention center and work release unit. Hazards at the detention center were abated during the inspection and the work release unit had no cited hazards.

Interim Chairperson T.D. Reece welcomed comments from the representatives of the Frederick County Detention Center and Annex. Lieutenant Colonel W. Victor DeLauter introduced the staff who accompanied him to the meeting Assistant Warden Michael Cronise, Captain Timothy Selin and Lieutenant Charles Clarke). Lieutenant Colonel DeLauter expressed appreciation to the audit team for a great job as usual. He stated that the audit keeps the facility on its toes. Lieutenant Colonel DeLauter stated that the credit goes to the staff. He stated that he has experienced a great deal of audits and it is a team effort between the staff and the Standards Commission. Lieutenant Colonel DeLauter commented that the audit is never adversarial between the auditors and the administration/staff. He added that the auditors' goal is to make the facility better as the facility strives to do better. Lieutenant Colonel DeLauter commented that the credit of total compliance goes to the staff. He stated he believes that he has the best staff in the state of Maryland. Lieutenant Colonel DeLauter stated that the staff work hard every day to achieve total compliance with the standards, not just during the audit. He stated that the credit goes to the lowest line officer to the assistant warden for their hard work and dedication to the daily operations in order to achieve total compliance with the standards. He stated that he accepts the award on behalf of the staff of the Frederick County Detention Center and Annex.

Interim Chairperson T.D. Reece invited comments/questions from the Commission members. Interim Chairperson Reece said that he wanted to add to Lieutenant Colonel DeLauter's statement regarding teamwork. He stated that in Maryland, we are fortunate to have standards and the standards brings almost every county jail in Maryland together as a team. He added that teamwork is the single most reason why we communicate with each other in order to find out how another facility operates. Interim Chairperson Reece stated that communication is key and it takes a team effort.

Interim Chairperson T.D. Reece entertained a motion to vote and approve the monitoring report and grant the Recognition of Achievement award. Dr. Maria Elmo made a motion to accept the monitoring report and grant the Recognition of Achievement award and Ms. Delores Alexander seconded. The vote to approve the report and grant the Recognition of Achievement award was unanimous. The Commission members congratulated the administration and staff of the Frederick County Detention Center and Annex on their achievement. The Frederick County Detention Center and Annex was presented with the Recognition of Achievement award. A photo of the presentation was captured by Assistant Executive Director Veronica Moore.

7. NEW BUSINESS

Interim Chairperson Reece reported that the Maryland Legislative session is underway. He stated that bills are currently being presented. Interim Chairperson Reece encouraged the correctional officials to contact him if there is something that you wish to comment on or if you have a position on a particular bill.

Interim Chairperson Reece reported that he is currently serving as the president of the Maryland Correctional Administrators Association. He stressed the importance of correctional officials being active during this legislative session.

Executive Director Howard Ray, Jr., stated that information regarding the new standard as it relates to Feminine Hygiene/Menstrual Products was disseminated by MCCA last week. Executive Director Ray deferred to Assistant Executive Director Veronica Moore to comment on the new standard regarding Feminine Hygiene/Menstrual Products. Assistant Executive Director Moore reported that COMAR regulations had changed concerning menstrual hygiene practices. Assistant Executive Director Moore stated the following changes are reflected in COMAR (.05 for Adult Detention Centers and .04 for Adult Correctional Institutions and Adult Community Correctional Facilities). She employed everyone to be sure to read the COMAR regulations because there are some specific changes concerning the menstrual hygiene articles and the no cost for menstrual hygiene articles. Assistant Executive Director Moore reported that notices will be sent to facilities scheduled to be audited in fiscal year 2021. Assistant Executive Director Moore reported that information will be forwarded by mid-February to institutions scheduled to be audited regarding that particular standard.

8. ANNOUNCEMENTS/EXECUTIVE SESSION

Interim Chairperson T.D. Reece announced at this time an Executive Session would be held. He encouraged guests who wished to stay after the Executive Session are more than welcome to do so. Interim Chairperson Reece expressed safe travels to anyone who could not remain for the adjournment of the meeting.

Executive Director Howard Ray, Jr. expressed appreciation to the Commission members for the quorum regarding the meeting. Executive Director Ray began his comments by stating that all good things must come to an end. Executive Director Ray announced, effective April 1, 2020, his plans to retire from State Government service. He stated it has been an honor to serve as the Executive Director of the Maryland Commission on Correctional Standards. Executive Director Ray said that he re-located to Maryland in 2003 to accept a position as Commissioner of the Division of Pretrial Detention and Services. Mr. Ray stated that his most significant contribution to the state has been his time at the Maryland Commission on Correctional Standards. He elaborated that he has loved working at the Standards Commission. Mr. Ray

commented that he cannot say enough good things about the Standards Commission staff. He stated that the staff always steps up to accomplish anything that needs to be done. Executive Director Ray said that essentially standards are critical in the daily operations of facilities. He stated that he believes that Maryland is unique in the sense that there is a Standards Commission. Executive Director Ray added that the difference with Maryland is that the people who are involved in the standards view the standards very seriously. Executive Director Ray stated that the correctional professionals get the commitment from the state, but specifically from the counties. Mr. Ray added that Maryland really stands out among all of the states in the country. He commented that the standards have been sort of a bell weather. Executive Director Ray commented on ACA and stated that he hopes all of the state institutions will become ACA accredited. Executive Director Ray encouraged everyone to continue to support the standards. He reflected on some of the problem areas over the years regarding the standards, for example fire safety. Mr. Ray stated that because the fire safety issues were pointed out, it gets the officials moving along to get the support that is needed to resolve those issues. Mr. Ray reflected on the issues regarding needles and syringes. He stated that the presence of an advocate on the Commission Board as the medical professional has helped bring awareness that medical is a part of security. He commented on the issues regarding food service employee clearances. Mr. Ray stated that the issues regarding food service employee clearances had a lot to do with communication. Executive Director Ray spoke about the recent number of appeals/hearings. He stated that each appeal/hearing was a learning experience. Mr. Ray stated that he believes everyone from the state institutions and local institutions are invested in standards. Executive Director Ray stated in closing that it is very important to have a strong effective standards commission in the State of Maryland. He closed his remarks by stating that it is time for him to decrease as others increase. The Commission members congratulated Mr. Howard Ray, Jr. on the achievement.

Interim Chairperson T. D. Reece reconvened the meeting to include guests who wished to rejoin the meeting.

Dr. Maria Elmo asked if a decision was made regarding the new Chairperson on the Commission Board. Interim Chairperson Reece responded that he was not aware of any decisions that have been made regarding the new Chairperson to head the Commission Board.

9. ADJOURNMENT

Interim Chairperson T.D. Reece entertained a motion to adjourn the general meeting of the 270th Commission meeting. Commissioner Wayne Hill made a motion to adjourn the general meeting and Citizen Member Delores Alexander seconded. The general meeting of the 270th Commission Meeting concluded at 11:50 a.m.